

09/464637

| POSITION | INITIALS | ID NO. | DATE |
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| FEE DETERMINATION | 94 | | 11/3/00 |
| O.I.P.E. CLASSIFIER | 8 | | 01-11-00 |
| FORMALITY REVIEW | | | |
| RESPONSE FORMALITY REVIEW | | | |

59573

2-4-00

59573

5-12-00

INDEX OF CLAIMS

- ✓ Rejected N Non-elected
- = Allowed I Interference
- (Through numeral)... Canceled A Appeal
- + Restricted O Objected

| Claim | Date |
|------------------------|------|
| Final Original 8 | |
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| Claim | Date |
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| Final Original 51 | |
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| Claim | Date |
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| Final Original 101 | |
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If more than 150 claims or 10 actions
staple additional sheet here

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